

Black Infants • Better Survival



Campaign Chronicle

New Jersey Department of Health and Senior Services
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The State of New Jersey, Department of Health and Senior Services Campaign to Reduce Black Infant Mortality

Chronology of Events

1994	The Department of Health and Senior Services (DHSS) and the Northern New Jersey Maternal/Child Health Consortium (NNJMCHC) establish a Research Task Force to study maternal and child health issues.
Fall 1996	DHSS proposes the establishment of a Blue Ribbon Panel to study Black infant mortality.
December 1996	The Blue Ribbon Panel on Black Infant Mortality Reduction convenes its first meeting.
September 1997	The Blue Ribbon Panel publishes its findings, the Blue Ribbon Panel Report on Black Infant Mortality Reduction.
April 1998	DHSS convenes an Advisory Council on Black Infant Mortality to identify ways to bring the Blue Ribbon Panel Report recommendations into action.
July 1998	The New Jersey Legislature appropriates \$500,000 for a Black infant mortality public awareness campaign.
Summer 1998	DHSS issues a Request for Proposals to conduct a two-year, \$1 million public awareness campaign on Black infant mortality.
Fall 1998	DHSS staff and representatives from the Blue Ribbon Panel and the Advisory Council conduct formal review of submitted proposals.
December 1998	Public awareness contract awarded to a team consisting of Nancy Becker Associates, Princeton Partners and Wise Choices Consulting Services.
Winter – Spring 1999	DHSS and the consulting team put together the advertising component of the public awareness effort. DHSS and NNJMCHC begin to conceptualize the professional education component of the campaign, including the creation of an informational booklet for health care providers, to be designed by Dana Communications, and a Black Infant Mortality Reduction (BIMR) Resource Center at NNJMCHC.

March 1999	NNJMCHC holds statewide summit exploring racial disparities in infant mortality. Initial public awareness campaign name, plan, messages and images are unveiled.
May 1999	The public awareness campaign, Black Infants Better Survival (BIBS), is launched, including a website and toll free 888 number.
May- December 1999	General and targeted public awareness advertising campaign runs on television, radio, billboards and in the print media.
July 1999	DHSS awards mini-grants to five of the maternal/child health consortia to promote Black infant mortality reduction activities.
September 1999	Community education component of the public awareness campaign is launched.
October 1999	Professional education component of the campaign is launched, including the informational booklet, the website and the Black Infant Mortality Reduction (BIMR) Resource Center at the NNJMCHC.
December 1999	DHSS issues a Request for Proposal for the provision of direct health services to Black women of childbearing ages to reduce Black infant mortality.
June 2000	Seven recipients of the Black Infant Mortality Reduction (BIMR) Health Service grants (BIBS Partnership Grants) are identified.
September 2000	NNJMCHC holds a celebratory dinner honoring the pioneers of the effort on Black infant mortality reduction.
October 2000	DHSS makes formal announcement of recipients of BIBS Partnership Grants.
Fall 2000 – Present	BIBS Partnership Grant recipients begin their outreach, education and service efforts.
March 2001	BIBS community health educator training is conducted.
June 2001	Black Infants Better Survival Second Anniversary Summit.



“...in New Jersey, and around the country, regardless of maternal age, education, income or marital status, a Black infant is more than two times as likely to die in the first year of life than a white infant.”

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The Effort Begins...

In 1994, Department of Health and Senior Services Commissioner Len Fishman joined with the Northern New Jersey Maternal/Child Health Consortium (NNJMCHC) in establishing a Research Task Force to study maternal and child health issues from a scientific perspective, including risk factors related to poor pregnancy outcomes. In the course of research, task force members discovered numerous studies that cited disparities in pregnancy outcomes between Black and white mothers.

In the fall of 1996, Jean Marshall, then Assistant Commissioner at the Department of Health and Senior Services (DHSS), proposed the establishment of a Blue Ribbon Panel to study the problem of Black infant mortality. Yvonne Wesley of the NNJMCHC and Anita Lockerman of the North Jersey Shore Continental Societies were named co-chairs of the nascent panel. 31 members were eventually selected to serve on The Blue Ribbon Panel on Black Infant Mortality Reduction, which held its first meeting in December of 1996. The panel published its report in September of 1997. The findings and recommendations found in the *Blue Ribbon Panel Report on Black Infant Mortality Reduction* formed the foundation for the activities undertaken by DHSS and its partners for the next three and a half years.

In the *Blue Ribbon Panel Report on Black Infant Mortality Reduction*, 1994 statistics rank New Jersey 13th among the 29 states that track infant mortality by race, with a rate of 16.3 Black infant deaths per every 1,000 live births. By contrast, Iowa ranked first, with 22.7 Black infant deaths and Massachusetts 29th, with 11.0 Black infant deaths. The stunning statistic that the Report clearly brought forward was that **in New Jersey, and around the country, regardless of maternal age, education, income or marital status, a Black infant is more than two times as likely to die in the first year of life than a white infant.**

The Report included five findings regarding Black infant mortality and an extensive range of recommendations to address these findings. Finding #1 stated that, "There is little awareness of the extent of the problem of Black infant mortality in New Jersey." The Panel's first recommendation regarding this finding was to "Develop a public awareness campaign that highlights Black infant mortality."

The Effort Continues . . . Reaching the General Public and Black Women of Child Bearing Age and Their Families

The Creation of the Black Infants Better Survival (BIBS) Campaign

In the spring of 1998, Governor Whitman proposed and the Legislature endorsed an appropriation of \$500,000 to conduct a statewide media campaign to increase public awareness of the tragic problem of Black infant mortality.

Following the approval of the State appropriation, in the summer of 1998, DHSS acted on the first finding of the *Blue Ribbon Panel Report* by issuing a Request for Proposals for an advertising and public relations campaign.

Following extensive review by DHSS staff and representatives of the Blue Ribbon Panel and Advisory Council, in December, a team led by Nancy Becker Associates, including Princeton Partners and Wise Choices Consulting Services, was awarded the contract to conduct a two-year, \$1 million public awareness campaign. The public awareness campaign included three components: paid advertising; media outreach; and community education. The campaign took shape through the winter and spring of 1999 as the Department and consulting team honed messages, images and outreach methods.

On May 18, 1999, DHSS launched Black Infants Better Survival (BIBS) at a press conference at the Henry J. Austin Health Center in Trenton. The first wave of advertising began on that date. Additionally, the website (www.state.nj.us/health/bibs) went online and a toll free 888 number (888 414-BIBS) became operational.

The community education effort, a part of the public awareness component, was officially launched at a press conference at Atlantic City Medical Center on September 9, 1999. It featured a model community outreach presentation by Rhonda Wise of Wise Choices.

The Effort Continues . . . Reaching Health Care Providers

Professional Education

Also in the winter and spring of 1999, the Department began a concurrent effort to provide information and training on Black infant mortality to the health care community. This responded to The Blue Ribbon Panel's second finding that "there are numerous psycho-social factors that are likely contributors to the racial disparity in birth outcomes," and its three recommendations to address this finding:

- 1) foster a health care environment sensitive to the specific emotional and physical needs of Black women;

- 2) improve awareness of cultural differences and promote increased respect for these differences among health care providers; and
- 3) promote behaviors and lifestyle choices that facilitate improved pregnancy outcomes despite psycho-social stressors.□

The Department, with the assistance of the NNJMCHC and Dana Communications, began work on professional education activities including an informational booklet and a section of the web site devoted to education of health care professionals. The Department also contracted with the NNJMCHC to establish a Black Infant Mortality Reduction (BIMR) Resource Center at the consortium.

The professional education component of the BIBS campaign was launched at St. Barnabas Hospital on October 25, 1999. At that event, Dr. Stuart Cook, president of the University of Medicine and Dentistry (UMDNJ), announced the creation of a Black Infant Mortality Research Task Force at the university.

The Effort Continues . . . Reaching Black Women and Providing Direct Services

Mini-grants to Consortia

Black Infant Mortality Reduction Health Service Grants (BIBS Partnership Grants)

In July of 1999, DHSS began its effort to provide direct services to Black women of childbearing age by awarding \$10,000 mini-grants to five of the state's maternal and child health consortia. Between January and June of 2000, they implemented a variety of Black infant mortality reduction activities including: publishing informational documents; creating a library series about the issue; developing professional education programs; and conducting community conferences. The grants were awarded to: the Central New Jersey Maternal and Child Health Consortium; the Gateway Maternal and Child Health Consortium; the Northwest NJ Maternal and Child Health Network; the Hudson Perinatal Consortium; and the Southern NJ Perinatal Cooperative.

Subsequently, DHSS established a larger grant program for local health care and social services agencies to provide direct services to Black women of child bearing age. In the first year of the partnership grants, a total of \$1 million was awarded to seven agencies: AD House- Healthy Start Resource Center, Newark; the Central New Jersey Maternal and Child Health Consortium, Piscataway; the City of East Orange, Department of Health; City of Trenton, Division of Health; Heureka Center, Willingboro; the Hudson Perinatal Consortium, Jersey City; and, the Northern New Jersey Maternal/Child Health Consortium, Paramus.

The grants were formally awarded at a press conference at City Hall in Trenton on October 18, 2000.

The Effort Continues . . . Going Forward

The DHSS has created a multi-faceted campaign to address the insidious problem of Black infant mortality. As all the research shows, this is a problem that defies any simple solution. The campaign was designed as an “upside down pyramid,” beginning with a very broad audience and message and moving toward a targeted audience and specific services. BIBS began with an advertising campaign aimed at the general public and continued with an advertising campaign targeting Black women of child bearing age and their families. It then moved toward education of health care professionals and Black women directly. Looking to the future, the effort will focus on grassroots outreach into the Black community and the provision of direct services, as was begun with the mini-grants and the initial round of BIBS Partnership Grants.

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Advertising and Public Relations Campaign Strategy



Following initial meetings with former Commissioner Fishman, other top decision makers in DHSS, citizen activists on the issue and members of the campaign team, it was decided that the advertising campaign would be divided into two stages. The first stage would aim to raise general awareness of Black infant mortality and last for three months. The second stage would be targeted at the Black community, particularly Black women, and would last for the remainder of the two-year effort. The first stage began in May of 1999 and continued through August. The second stage began in September, coinciding with Minority Health Month.

Gearing up for the campaign...

Three focus groups were conducted by Rhonda Wise in the spring of 1999 to test potential campaign names, messages and visuals. While composed largely of Blacks, these groups did have some racial diversity. The information gathered from these focus groups was essential in pulling together the advertisements and other campaign elements.

Princeton Partners, working with the other members of the campaign team, designed distinct advertising visuals, messages and components for each of the two stages. However, they ensured that they were linked graphically through typeface, usage of the campaign name -Black Infants Better Survival (BIBS) and basic design.

Conveying the message...

The centerpiece of the general awareness effort was a black and white print ad featuring a smiling Black baby and the question, "Can you see why this baby has less of a chance of making it to his first birthday?" with the response, "Neither can we." The photo of the baby is also utilized on the campaign letterhead and on the website. The general awareness campaign also incorporated color billboards featuring separate photos of a Black and a white baby and the statement, "Infant survival should be an issue of life and death, not black and white." For distribution to radio, a 30 second spot with Governor Whitman's voice was produced as were scripts for 15, 30, and 60 second Public Service Announcements (PSAs). In the interest of cost savings, one television spot was designed to run during both stages. Featuring a Black woman sadly packing up the contents of a nursery, the spot made a poignant and universal statement about the tragedy of Black infant mortality.

In addition to the above advertising components, the website and the 888 number were operational at the beginning of the general awareness campaign. The campaign was launched by Commissioner

Christine Grant and Assistant Commissioner Henry Spring at a press conference at the Henry J. Austin Health Center in Trenton on May 18, 1999.

Advertising for the targeted stage of the BIBS campaign centered on a photograph of a Black mother and baby. This image was used on the print ad, billboard, website, poster and informational brochure. The print ad and billboard featured the message: "Your chances of losing your baby are twice those of a white mother: Do you want to do something about it? So do we." The poster included the first statement followed by, "Let's save our future." Responding to the need to include a pre-natal care message in any materials targeted at Black mothers, the print ad included information about the importance of getting medical care when pregnant and after the birth of the baby. The brochure discussed the unexplained disparity between Black and white infant deaths, but also included information on how to improve the chances of a healthy pregnancy and infancy. All materials included the campaign's toll free 888 number (888 414- BIBS) , and the website, (www.state.nj.us/health/bibs) , except for the billboards which did not contain the website address. DHSS distributed the posters and brochures to agencies throughout the state that receive grants from the Department.

The targeted stage of the campaign was launched at a press conference at the Atlantic City Medical Center on September 9. The Community Education component of the campaign was also launched on that date.

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Public Relations



Getting Media Attention

Four major press conferences served as the core of the BIBS public relations activities for the campaign. The first press conference, the official launch of the campaign, and the second, the launch of the targeted stage, earned significant media coverage and provided a springboard for additional media interest.

Campaign Launch - May 18, 1999

Announcement:

The creation of the Black Infants Better Survival (BIBS) Campaign

The general awareness print and billboard advertisements were unveiled, the television and radio spots premiered and the toll free 888 number and website were announced. The event was held at the Henry J. Austin Health Center in Trenton.

Speakers

- Christine Grant, Commissioner of DHSS
- Dr. Henry Spring, Assistant Commissioner of DHSS
- Yvonne Wesley, Vice President of Research and Development, NNJMCHC and Co-Chair, Blue Ribbon Panel on Black Infant Mortality Reduction
- Juanita Johnson, Village Communications, Consultant to BIBS Campaign Team

Print Media Coverage

- *The Star-Ledger* (With 2 Photographs of Christine Grant)
- *The Trenton Times*;
- *Herald & News* (Front Page)
- *The Record*
- *Asbury Park Press*
- *The Trentonian*
- *The Express-Times*
- *Daily Record*
- *Burlington County Times*
(With box with campaign 888 number and website information)
- *Gloucester County Times*
- *Atlantic City Press*
- *N.J. Herald*
- *Jersey Journal* (Front page)

- *Bucks County Times*
- *The Record* (editorial two days after event)
- *City News* (Front page, with photograph of Dr. Spring)
- *Home News & Tribune*

Electronic Media Coverage

- NJN
- News 12 New Jersey
- various radio

Targeted Campaign Launch - September 9, 1999

Announcement:

The launch of the advertising component is targeted phase as well as the launch of the community education component.

Held at the Atlantic City Medical Center, the event featured a model community outreach presentation conducted by BIBS partner Rhonda Wise. A group of Black women from the area took part in the session.

Speakers

- Lori Herndon, Administrator of the Atlantic City Medical Center
- Dr. Henry Spring, Deputy Commissioner of DHSS
- Rhonda Wise, Wise Choices Consulting Services

Print Media Coverage

- *The Philadelphia Inquirer* (Front page of South Jersey section)
- *Courier-Post* (Front page with related story inside)
- *Atlantic City Press* (coverage on day following event and a subsequent weekend story with large photograph of mother and child participating in the workshop, along with a head shot of Dr. Spring)
- *The Trenton Times*
- *Courier-Post* (Editorial)

Electronic Media Coverage

- Philadelphia WTXF -Fox 29 (extensive 10:00 news story)
- Philadelphia WPHL - WB 17 (health segment, 10:00 news)
- Atlantic City WMGM, NBC 40
- Philadelphia WTXF - Fox 29 (Follow up interview with Dr. Spring on half-hour program, "New Jersey Journal")

Professional Education Launch - October 25, 1999

Announcements:

The launch of the professional education website and the distribution of the professional education booklet;

The establishment of a Black Infant Mortality Reduction (BIMR) Resource Center at the Northern New Jersey Maternal/Child Health Consortium; and,

The awarding of a grant by Johnson & Johnson to develop a Continuing Medical Education (CME) Roving Symposium.

Additionally, Dr. Stuart Cook, president of the University of Medicine and Dentistry of New Jersey (UMDNJ) announced the establishment of a Black Infant Mortality Research Task Force at the university. The event was held at Saint Barnabas Hospital in Livingston.

Speakers

- Christine Grant, Commissioner of DHSS
- Ronald Del Mauro, President/CEO of Saint Barnabas Health Care System
- Dr. Alexander Hyatt, Chairman of the Board, NNJMCHC
- Dr. Pathik Wadhwa, Department of OB/GYN, University of Kentucky
- Dr. Stuart Cook, President, UMDNJ

Print Media Coverage

- The Star-Ledger

Announcement of the BIBS Partnership Grants- October 18, 2000

Announcement:

The awarding of \$1 million in BIBS Partnership Grants.

These grants were awarded to seven agencies throughout the state for outreach and other direct services to Black women of childbearing age in order to improve pregnancy outcomes. The event was held at Trenton City Hall.

Speakers

- Richard Salter, Health Officer, City of Trenton Division of Health
- Christine Grant, Commissioner of DHSS
- Jeanette Arrington, Project Coordinator, City of Trenton Division of Health
- Rhonda Wise, Wise Choices Consulting Services

Print Media Coverage

- *The Star-Ledger*
- *The Times*
- *Asbury Park Press*
- *Burlington County Times*
- *Home News & Tribune*
- *Courier Post*
- *Daily Journal*
- *Jersey Journal*
- *Atlantic City Press*
- *Daily Record*
- *Herald & News*
- *The Record*

Electronic Media Coverage

- News 12, Segment on "To Your Health"

Attracting Additional Media Attention

In addition to capturing media attention around the specific press conferences and media events, the BIBS campaign has created a buzz around the state and in the professional community that has spurred other articles related to the effort. The campaign also received coverage in several national health care publications. The following is a list of some of the additional coverage that has been garnered to date.

Media Attention

- *The Star-Ledger* - Article highlighting the efforts of a local agency in combating Black infant mortality in the community (December 17, 2000)
- *Trenton Times*- Article focusing on the efforts of Trenton women counseling expectant and new mothers as part of Trenton's Black Infants Better Survival program (April 2, 2001)
- *Ocean County Observer*- Article highlighting the work of local activist in combating Black Infant Mortality (November 7, 2000)
- *ASTHO Report*- The Association of State and Territorial Health Officials included and article on the BIBS campaign in their newsletter. (March/April 2001)
- *Hospitals & Health Networks*- Included an article on the Department's efforts to combat Black infant mortality. (July 2000)

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Advertising



Campaign Development

Working with the other members of the team, Princeton Partners led in the development of the overall campaign strategy and provided the creative engine that produced and refined the campaign themes and images.

Advertising Vehicles

- (2) Print ads for newspapers and magazines
- (2) Billboards for outdoor advertising
- (2) Transit executions, one for buses and one for trains
- Campaign poster
- Television commercial
- Pre-recorded radio commercial, featuring Governor Whitman
- Announcer-read radio scripts in three lengths
- A brochure providing information on steps to take for a healthy pregnancy and birth
- Website

Media Placement

Print Advertising

Publication

Schedule

Star Ledger

May - September, November 1999
October 17, 2000

Trenton Times

May - September, November 1999
October 17, 2000

Asbury Park Press

May - September, November 1999
October 17, 2000

Home News & Tribune

May - September, November 1999
October 17, 2000

Camden Courier Post

May - September, November 1999
October 17, 2000

Atlantic City Press

May - September, November 1999
October 17, 2000

Jersey Journal

May - September, November 1999
October 17, 2000

Bergen Record

May - September, November 1999
October 17, 2000

North Jersey Herald and News

May - September, November 1999
October 17, 2000

Publication	Schedule
<i>City News</i>	September - December 1999 October 2000
<i>The Connection</i>	September - December 1999 October 2000
<i>Nubian News</i>	September - December 1999 October 2000
<i>New Jersey School Leader</i>	July - December 1999
<i>New Jersey Medicine</i>	June, September - October 1999
<i>New Jersey Municipalities</i>	September - November 1999
<i>New Jersey Business</i>	September - November 1999
<i>Suburban Home Network</i>	August 1999
<i>Suburban News Network</i>	September 1999
<i>Executive News Network</i>	November 1999

Outdoor Advertising

Location	Schedule
Mercer, Burlington, Atlantic, Cape May	June - August 1999
Essex, Hudson, Bergen, Passaic	June - August 1999
Essex, Hudson, Mercer, Passaic, Camden	September - December 1999

Transit

Location	Schedule
Trains - Interior	June - August 1999
Buses - Interior	September - December 1999

Television

Venue	Schedule
New Jersey Cable Stations	June, September, November 1999

Radio

Station	Schedule
New Jersey Broadcasters Association	June - August 1999
New York and Philadelphia Network PSAs	Ongoing

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Community Education



The community education component of the campaign was launched at the Atlantic City press conference on September 9, 1999, along with the targeted stage of advertising. At that event, Rhonda Wise conducted a model community outreach presentation before a group of Black women from the Atlantic City area. Subsequently, community education presentations were welcomed by schools, community-based organizations, and various health promotion agencies. The information was readily received by a variety of audiences, including students, clients and professionals.

As part of the Community education component, more than 50 presentations or overviews were completed, and information was provided to over 1,000 individuals. Most received a BIBS presentation, many others received a brief overview of the subject matter, and the rest were offered handouts and posters. BIBS Presentations and/or information dissemination were made by Wise Choices Consulting Services at the following sites:

Atlantic City Medical Center
 Essex County Outreach Workers Association, Newark
 School Based Youth Services and Affiliates, Trenton
 Healthy Mothers/Healthy Babies Directors, Trenton
 Cathedral Midwifery Program, UMDNJ, Newark
 Ad House, Newark
 Malcolm House, Orange
 Essex County Healthy Mothers/Healthy Babies Coalition, Newark
 Stella Wright Drop In Center, Newark
 Isaiah House, East Orange
 Elizabeth Perinatal Addiction Program, Elizabeth
 Isaiah House, Orange
 Central NJ Maternal/Child Health Consortium, New Brunswick
 Grove Street School, Irvington
 Robert Wood Johnson Medical School
 The Bridge Program, Irvington
 Irvington Health Department
 St. Columba Neighborhood Club, Healthy Mothers/Healthy Babies
 Irvington High School
 West Kinney Alternative High School
 Network for Family Life Education
 The WIC Program at University Hospital
 Healthy Mothers/Healthy Babies -Plainfield
 Teacher Training for NFLE, Cherry Hill

Best Friends, Orange High School
Teacher Training for NFLE, Piscataway
Love Your Child/Mother's Day Extravaganza, Newark
Schwartz Robeson Community Center, New Brunswick
Central NJ Maternal and Child Health Consortium, Piscataway
Children's Center, New Brunswick
Orange Health Fair, Orange High School
Project Smile, Trenton
First Birthday Luncheon, Newark
Babyland/UMDNJ Health Fair, Newark
Hurtado Health Center, Rutgers-New Brunswick
START BARR Program, UMDNJ (male group)
Hudson Perinatal Consortium
Black Infant Mortality Dinner, Newark Club, Public Relations
St. Francis Hospital, Trenton
Trenton Health Department BIBS Mentors, Mt. Zion Baptist Church
Mercer Medical Center, Trenton
Minority Health Event, Burlington County
Sparta Township Teacher In-service
Sunrise House Foundation, Franklin
Babyland, Newark
Healthy Mothers/Healthy Babies - Trenton
Rutgers Cooperative - Trenton
East Orange Health Department
Southern NJ Family Medical Center

BIBS Health Educator Training

A Black Infants Better Survival (BIBS) Health Educator training was conducted in March 2001 by DHSS staff and Rhonda Wise.

Recognizing that an effective community education campaign was going to demand the involvement of many individuals, the purpose of this training was to prepare members of various health provider agencies, community based organizations and others to conduct community education presentations about Black infant mortality and its related issues for members of the general public.

The training was held at DHSS in Trenton. Thirty-two individuals from health and social service agencies, hospitals and community-based organizations statewide attended. Each participant received a copy of the *Black Infant Better Survival Health Education Training Course Manual*.

After completing this training the participants were able to:

- Discuss highlights of The Blue Ribbon Panel On Black Infant Mortality Reduction Report
- Describe components of the Black Infants Better Survival Awareness Campaign
- Identify facts and myths relating to Black infant mortality
- Describe issues related to Black infant mortality
- Describe how cultural competency impacts birth outcomes
- Identify community-based resources that can provide further information or services to reduce infant mortality
- Discuss components necessary for conducting community education presentations
- Demonstrate an effective presentation about Black infant mortality.



“ The Black Infant Mortality Reduction (BIMR) Resource Center
... a clearinghouse for information.”

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The Black Infant Mortality Reduction Resource Center



The Black Infant Mortality Reduction (BIMR) Resource Center was established in October of 1999 to forward the existing efforts of DHSS and NNJMCHC in their battle against the high rate of Black infant mortality. The Center acts as a clearinghouse for health statistics and research literature.

Consumer and professional education presentations increase public awareness and enhance the level of cultural sensitivity in the delivery of health care. A warm line is available to answer questions regarding disparities in health as a function of race. In addition, the BIMR Resource Center oversees "Reduce Stress for Baby's Best" (RSFBB), a pre-term labor prevention project.

A Clearinghouse for Information

The BIMR Resource Center functions as a clearinghouse and focuses on the distribution of health statistics to physicians, nurses, social workers and public health advocates who are researching Black infant mortality from a myriad of aspects. The Center receives calls from across the nation including inquiries from schools such as: Johns Hopkins; University of Pennsylvania-School of Nursing; the Black Women Health Study, a collaboration of Boston University and Howard University - Schools of Medicine; and the University of Medicine and Dentistry of New Jersey. Other contacts are from community agencies in Tennessee, California, North Carolina, and a Father's Program in Savannah, Georgia. BIMR also responds to the questions posed by Departments of Health throughout New Jersey and the Health Department in New Haven, Connecticut.

Enhancing Public Awareness

As part of the Center's goal to enhance public awareness, it provided technical assistance to the advertising, public relations and community education components of the BIBS campaign. Center staff has been involved in BIBS training programs designed to teach members of community-based organizations how to deliver presentations to consumers. Center staff, as well as other professionals from its trained Speakers Bureau, heighten public awareness about the issues of pre-term labor and low birth weight babies by addressing a range of audiences from health care professionals to local employers with a workforce inclusive of minorities.

Johnson & Johnson Roving Symposium

On July 1, 1999, Johnson & Johnson awarded the BIMR Resource Center a grant to create a formal lecture series for physicians. To date, five such continuing medical education (CME) courses have been held at the following locations: St. Barnabas Medical Center; the Academy of Medicine of New Jersey; Englewood Hospital and Medical Center; University of Medicine and Dentistry of New Jersey- Robert Wood Johnson Hospital; and St. Joseph's Hospital. Future plans to present at Kings County Hospital in New York, Columbus Hospital and Morristown Memorial Hospital are underway. Based on attendance and speaker evaluations, these lectures have been very well received.

The "Warm Line"

The BIMR Resource Center's "warm line" received 534 telephone calls during the first nine months of operation. The majority of calls focused on: (1) questions about BIMR; (2) scheduling BIMR presentations in community agencies; and (3) "Reduce Stress for Baby's Best." Center consultations were provided throughout the nation in states such as Tennessee, Georgia, North Carolina, Wisconsin, Alabama, New York, Pennsylvania, Michigan, and Missouri. Many of these states either requested guidance in reference to their existing programs or direction in creating new programs. Others inquired as to what initiatives existed for the reduction of infant mortality within New Jersey and across the country. BIMR presentations were scheduled at elementary schools, Planned Parenthood and Healthy Mothers/Healthy Babies meetings. Calls for "Reduce Stress for Baby's Best" (RSFBB) included inquiries about the project, client enrollment and mental health consultant guidance.

Reduce Stress for Baby's Best (RSFBB)

The BIMR Resource Center supervises a unique pre-term labor prevention project called "Reduce Stress for Baby's Best." The program is funded by a BIBS Partnership Grant (see the next section for a full description).

BLACK INFANTS • BETTER SURVIVAL

BIBS Partnership Grants



In December of 1999, the DHSS initiated a Request for Proposal to health and social service agencies around the state for the provision of direct services to Black women of child bearing age. In June of 2000, seven recipients of the Black Infant Mortality Reduction (BIMR) Health Service grants (BIBS Partnership Grants) were identified. \$1 million in total grant funds was announced in October, 2000.

The efforts that are currently being undertaken as a result of the BIBS Partnership Grants are indicative of the future of the BIBS effort: reaching out directly to Black women, educating them about the risks they and their infants face, and helping them to identify behaviors and strategies that will increase their chances of a healthy pregnancy, healthy birth and healthy first year of life for their children.

The following outlines the activities of the grantees.

AD House, Healthy Start Resource Center, Newark

The BIBS Partnership Grant received by AD House has been used to provide services to pregnant adolescent girls, women and their families who reside in Newark, East Orange, Irvington, and Orange. The program is staffed with an outreach supervisor, one full-time outreach worker, and two part-time outreach workers.

The activities include intensified outreach for the recruitment of 50 pregnant African-American women and adolescents. In addition the program:

- Enrolls children of the women and adolescents into comprehensive pediatric services;
- Provides HIV education, counseling and testing;
- Refers all infants to early and periodic screening where all enrolled infants will receive adequate prenatal care;
- Decreases the number of pregnant women reporting risk behaviors at the delivery date;
- Ensures that the pregnant women and adolescents keep their prenatal appointments.

Central New Jersey Maternal and Child Health Consortium, Piscataway

The Central New Jersey Partnership on Black Infant Mortality Reduction (BIMR), a program of the Central New Jersey Maternal and Child Health Consortium, is a collaborative effort comprised of over 30 agencies and individuals interested in reducing the disparity that exists between Black and white infant mortality in Hunterdon, Mercer, Middlesex, and Somerset Counties, and the Plainfield portion of Union County. The Partnership takes a multifaceted approach to raising the awareness of Black infant mortality and implementing strategies designed to reduce psychosocial and biological factors related to Black infant mortality by:

- Funding part time registered nurses to provide monthly prenatal home visits to pregnant black women in Plainfield and New Brunswick;
- Increasing prenatal case finding and outreach services to Black women in New Brunswick, Plainfield, and Trenton;
- Reducing barriers to care for black women throughout the region through the provision of transportation vouchers to prenatal care appointments and providing support groups;
- Training outreach workers on topics that relate to BIMR, ensuring that they are knowledgeable and able to impart information to the women they serve;
- Involving community leaders in the planning, development, and implementation of regional and city specific initiatives;
- Providing mini-grants to grassroots, community based organizations implementing BIMR programs;
- Providing technical assistance and guidance to community agencies hosting BIMR programs through the development of a BIMR Community Starter Kit.
- Developing a Personal Health Guide as a means of providing Black women with information on preconception, prenatal and postpartum health care, as well as strategies for navigating the health and social service system.

In April of 2001, the Central Jersey Partnership on BIMR hosted a Community Awareness Dinner for 250 community members, including churches, sororities, civic groups, and health and social service agencies. Each attendee received a □Community Starter Kit□ They were also offered mini-grants of up to \$1,000 to aid in defraying the cost of hosting programs for their constituents. Since the start of the grant, a total of 29 women have been referred for home visits by a nurse with 17 receiving monthly home visits. Additionally, 89 pregnant Black women have been identified and connected to prenatal care services in New Brunswick, Plainfield, and Trenton. Approximately 140 professionals and paraprofessionals in the region have participated in training sessions on issues related to BIMR.

The City of East Orange Department of Health

This agency's grant is funding community work on Black infant mortality through the Infants, Mothers & Families Program for the City of East Orange.

On December 8, 2000 the Department launched its effort with a Baby Shower Kick-off. The event attracted more than 125 guests, including the Mayor of the City of East Orange, Robert L. Bowser. The Mayor also presented a proclamation of support for the efforts being undertaken by the community to combat Black infant mortality.

On March 27, 2001, a MOM's birthday party was held for all mothers enrolled in the program who celebrated their birthdays during the first quarter of the year. The event addressed goal setting and self-esteem. A cosmetologist was on hand to provide pampering and free makeovers.

The Department hosted a Teen Pregnancy Forum at a local community center on April 4, 2001. Over 100 teens attended.

On May 11, 2001 the Infants, Mothers & Family Program hosted an Infant Mortality Reduction Program/Baby Shower at the local library. Mayor Robert L. Bowser was again in attendance presenting a proclamation of support. Community collaborators and program participants attended the shower.

The City of Trenton Department of Health and Human Services- Division of Health

The Trenton BIBS Partnership Program is a collaborative effort between the City of Trenton Department of Health and Human Services- Division of Health, Mount Zion AME Church, Concerned Pastors of Trenton, and Mercer Street Friends.

The Trenton BIBS Partnership Program has provided training workshops about Black infant mortality at area clinics, hospitals, churches, and other community agencies. The Partnership has also sponsored a community health fair to increase access and educate the Trenton community about the services available to them. Mentor/Mentee meetings are held monthly to discuss issues such as:

- Identifying and reducing stressors
- Awareness and knowledge of pregnancy issues and warning signs
- Knowledge of community resources
- Effective parenting skills
- The importance of compliance in keeping doctors appointments
- Birth control and family planning
- HIV and other communicable diseases

In addition, the program's mentors provide weekly home visits to participants for support and health education. The program has also assisted other agencies by working with community awareness committees and participating in community functions to enhance community awareness regarding Black infant mortality.

The Hudson Perinatal Consortium, Jersey City

The Partnership Grant received by the Hudson Perinatal Consortium is being used to fund the "Not Even One" campaign. This campaign incorporates a multidisciplinary approach to Black infant mortality reduction. The goal of the effort is to decrease the disparity in infant mortality in Jersey City.

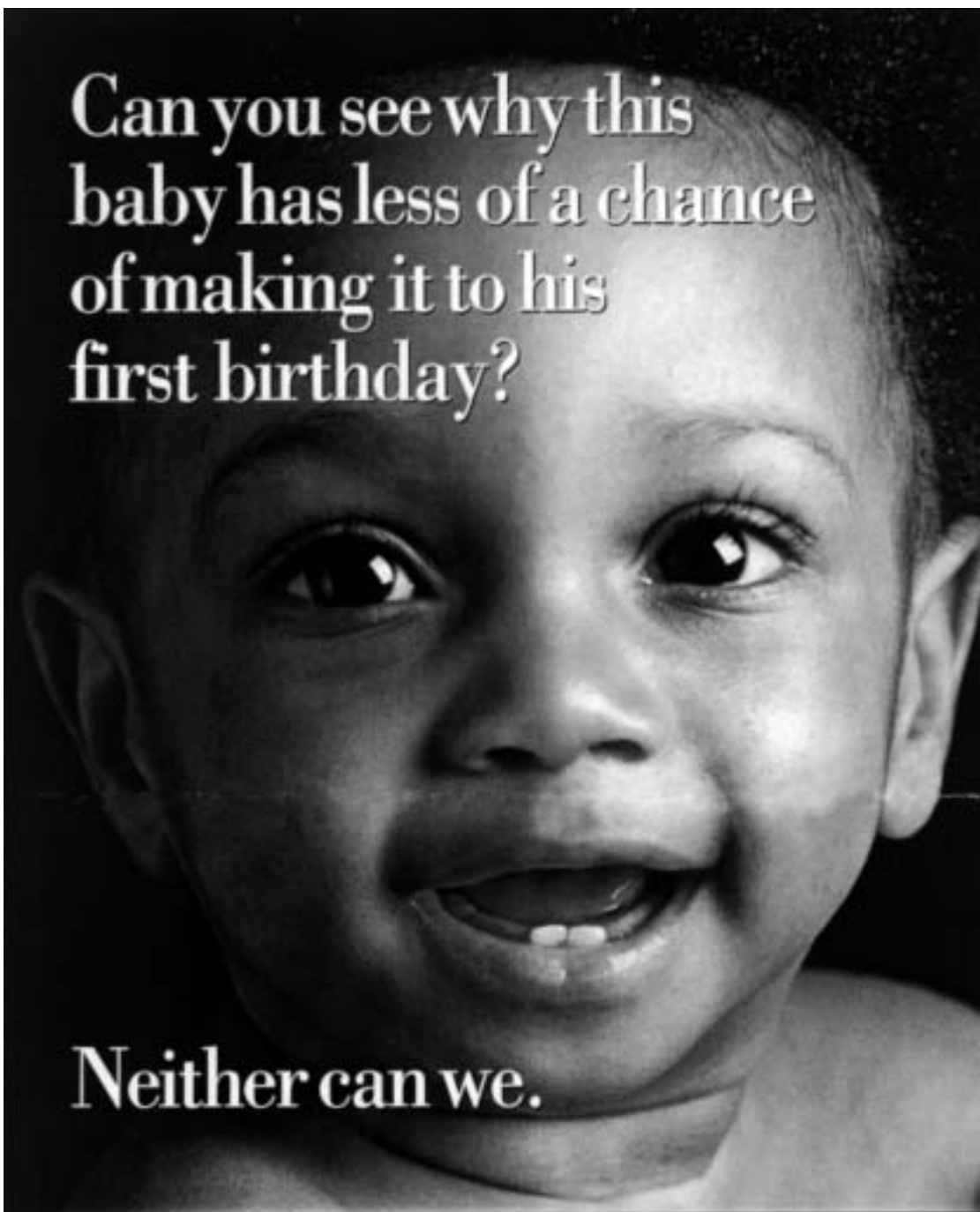
The program offers free weekly Yoga classes for expectant mothers as a means to reduce their stress levels. In addition, biweekly parenting classes are offered, and lectures are given monthly by guest speakers. The topics of these lectures include: breastfeeding education; maternal nutrition and fitness; drugs and pregnancy; labor and delivery; infant development; sexually transmitted diseases; SIDS, shaken baby syndrome; domestic violence; and stress reduction. Throughout the program, outreach workers work closely with clients to ensure that their needs are met.

Northern New Jersey Maternal/Child Health Consortium, Paramus

The Northern New Jersey Maternal/Child Health Consortium is using its grant funding to implement a Black infant mortality reduction project called "Reduce Stress for Baby's Best" (RSFBB). This unique pre-term labor prevention program is designed to teach Black women how to decrease stress during their pregnancy. Pre-term birth and low birth weight are the most frequent causes of infant mortality for infants born to Black mothers. Increased stress has also been linked to pre-term labor; thus, this project will attempt to prevent pre-term delivery through stress reduction techniques. Women who enroll in the program receive free individual stress management counseling. Trained nurses and social workers instruct pregnant Black women on the use of journal writing, stress workbooks, guided-imagery, and deep breathing exercises. A series of questionnaires and a saliva sample, to obtain cortisol levels, are completed at the beginning and the end of the program. Cortisol is a biological marker for stress. In summary, RSFBB is a creative, pre-term labor prevention project. Enrollment is approaching 80 participants. On preliminary analysis, the RSFBB interventions have decreased women's perceived stress levels, as reported by the participants.

Appendix





Can you see why this
baby has less of a chance
of making it to his
first birthday?

Neither can we.

Black babies are more than two times as likely as white babies to die in their first year of life. This is a tragedy. The New Jersey Department of Health and Senior Services wants babies to survive. And we want you to know that Black infant mortality is not a "black" problem. It's everyone's problem.

Black Infants • Better Survival

1-888-414-BIBS

www.state.nj.us/health/bibs

A message from The New Jersey Department of Health and Senior Services
Christine Todd Whitman, Governor



**Infant survival should be an issue of
life and death, not black and white.**



Black Infants • Better Survival | 1.888.414.BIBS



Your chances of losing
your baby are twice those
of a white mother.

Do you want to do
something about it?

So do we.

Black mothers are more than two times as likely as white mothers to lose their babies before their first birthday.

The New Jersey Department of Health and Senior Services wants you and your baby to get the care you need — before, during and after delivery.

To learn more, call us at 1-888-414-BIBS.

Black Infants • Better Survival

1-888-414-BIBS

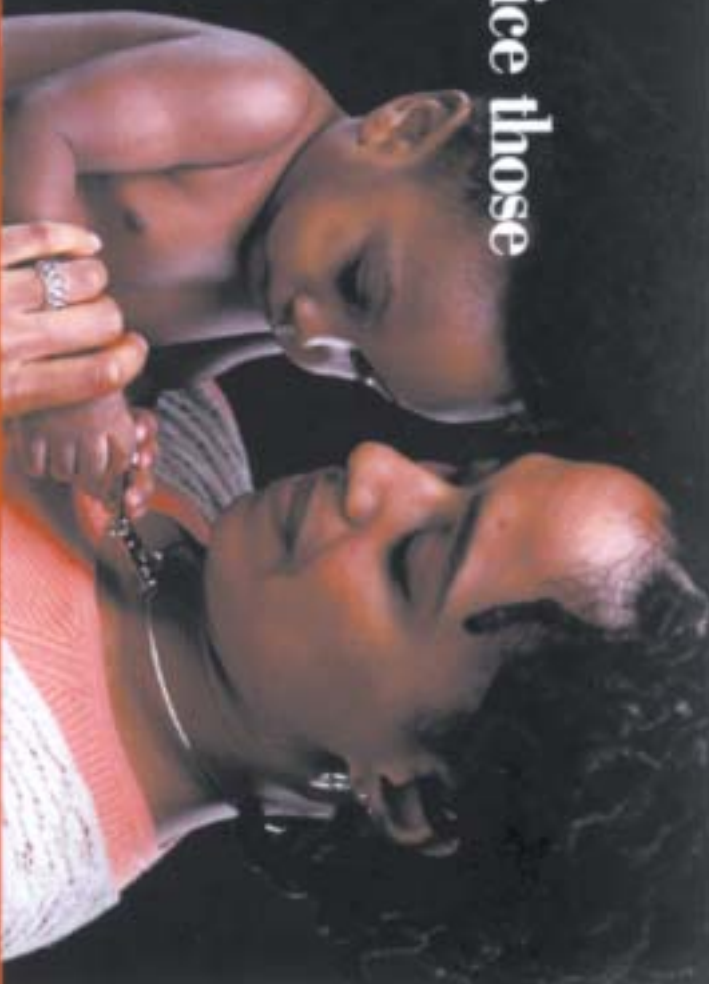
www.state.nj.us/health/bibs

A message from The New Jersey Department of Health and Senior Services
Christine Todd Whitman, Governor



**Your chances of losing
your newborn baby are twice those
of a white woman.**

Let's save our future.



Black Infants • Better Survival 1.888.414.BIBS

*A message from The New Jersey Department of Health and Senior Services
Christine Todd Whittleman, Governor*





BIBS

Guestbook
Overview
State Activities
Healthier Pregnancies
Experiences
How You Can Help
Statistics
News Briefs
Professional Education
Speakers Bureau
Contact Us



Black Infants • Better Survival

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Starting Points

- [Black Women](#)
- [Concerned Partners](#)
- [General Public](#)
- [Healthcare Providers](#)
- [Educators](#)
- [Reporters](#)





PHOTOS BY FRANK DIACOMO

Christine Grant, acting commissioner of the state Department of Health and Senior Services, speaks at the unveiling of a campaign designed to raise public awareness of black infant mortality at the Henry J. Austin Health Center in Trenton yesterday.

Ads focus on black infant deaths

By Donna Leusner
STAR-LEDGER STAFF

The tragic message that black infants are nearly three times as likely as white newborns to die before their first birthday will soon hit TV screens, billboards, transit ads and radio airwaves around New Jersey as part of a \$1 million public awareness campaign paid for by the state.

Although racial disparities in infant mortality rates have existed for nearly a century, a panel of health care experts who studied the problem for the state in 1997 found a stunning lack of awareness of the statistics.

The panel's top recommendation was a media campaign to educate the public about the problem and focus attention on the health needs of black women. That campaign — a series of print, broadcast and TV ads designed by a Princeton advertising agency — was unveiled yesterday by Christine Grant, acting commissioner of the state Department of Health and Senior Services, at a community health center in Trenton.

The black infant mortality rate has been on the decline in the state this decade, dropping from 19.3 deaths for every 1,000 live births in 1988, to 14.9 in 1996, the latest year for which statistics are available.

But a substantial disparity still exists between black and white infants: The death rate for white infants was 5.3 per 1,000 live births in 1996.

Nationally, the death rate for black infants was 14.1 in 1996, compared with 6.1 percent for white infants.

Dr. Henry Spring, who spent 12 years delivering the babies of poor mothers in Atlantic City before be-



Christine Grant, right, holds 4-month-old Dyanne Brown as the girl's mother, Melissa, looks on.

coming assistant state health commissioner, said there is no simple explanation to account for the disparity.

"They are dying for a host of different reasons. It's very difficult to be able to say with confidence these things are the cause of the problem. The more we look at the data, the more questions we have and the less we know," said Spring.

For example, he said, age, education and income do not account for the disparity: Well-educated middle-to upper-class black women who have excellent access to health care are still at greater risk than their white counterparts of having their babies die.

Stress and racial discrimination — in the workplace and in daily life — were cited in the panel's report as likely contributing factors.

Spring said babies who die in the first year of life are often born prematurely, have low birth weights and often develop complications like respiratory distress and pneumonia.

He said the issue has not been a priority until now.

Dr. Nathan Stinson, director of the Office of Minority Health in the U.S. Department of Health and Human Services in Washington, agreed. "The problem of infant mortality and the racial and ethnic disparity around infant mortality is a problem that has existed for decades and it continues to get worse," Stinson said in a telephone interview.

WEDNESDAY, MAY 19, 1999

WEDNESDAY
MAY 19, 1999

TRENTON METRO

The Times

SERVING OUR COMMUNITY FOR MORE THAN A CENTURY

Program targets high infant mortality of black babies

By MICHELLE J. SHIN
Staff Writer

TRENTON — A \$1 million, two-year public awareness program was launched yesterday by the state Department of Health and Senior Services to inform black women that their babies are more than twice as likely to die before their first birthday than white babies.

The campaign makes New Jersey the first state in the country to target black infant mortality on this scale. The awareness effort, entitled "Black Infants Better Survival" or BIBS, is the result of a state panel formed in 1996 to study the issue behind the ill-fated statistic.

Christine Grant, acting commissioner of DHSS, showcased the television, radio, newspaper and billboard ads that will be featured in the campaign. The program will also feature a Web site, www.state.nj.us/health/bibs, and a toll-free number, 1-888-414-BIBS.

"The fact that a black baby is two times as likely as a white baby to die before his or her first birthday is a startling and unacceptable statistic," said Grant. "When a black infant dies, it's not a black problem, it's everyone's problem."

In 1995, the black infant mortality rate was 90.3 for every 1,000 live births in New Jersey. That number dropped to 14.9 in 1996.

The number of white infant deaths for every 1,000 live births was 5.3 in 1996.

THERE IS NO single factor that explains why the black infant mortality rate is high nor is there a magic bullet to solve the problem, said Yvonne Wesley, director of research and development at the Northern New Jersey Maternal/Child Health Consortium and co-chair of the state's blue ribbon panel.

The most prevalent cause listed on death certificates is low birth weight, according to previously pub-

The campaign makes New Jersey the first state in the country to target black infant mortality on this scale.

lished reports.

"Babies are dying from a host of different reasons," said Dr. Henry Spring, an assistant health commissioner who served on the blue-ribbon panel. "We do know some of these complications start from prematurity and low birth weight."

Even educated black women of appropriate childbearing age were still 2.5 times more likely to lose their babies than white mothers, Wesley said.

Socioeconomic factors including "education, income and age will not predict which black babies will die," said Wesley.

"The Blue Ribbon Panel Report on Black Infant Mortality Reduction" found that "psycho-social stressors" such as racism were issues cited by many of the black mothers who were interviewed for the report.

"They were being discriminated against and not treated with respect," said Wesley.

However, the No. 1 recommendation by the panel was to alert people to the problem, Wesley said.

Susan Rountree, 32, a first-grade teacher at Woodrow Wilson Elementary School who is featured in the print ads, was not surprised by the findings of the report.

"The health care many minorities receive is inadequate compared to their white counterparts," said Rountree.

Assemblyman Herbert Conaway, D-Burlington City, introduced legislation last year based on the report. The bill would appropriate \$750,000 for black infant mortality reduction, education and research.

WEDNESDAY

MONMOUTH
COUNTY
EDITION

ASBURY PARK PRESS

MAY 19, 1999

SINCE 1879

State aims to cut black infant death rate

■ While there has been a sharp decline, the number of black infant deaths is still more than double that of white infant deaths.

THE ASSOCIATED PRESS

TRENTON — The state Department of Health and Senior Services launched a two-year, \$1 million public awareness campaign yesterday to inform black women that their babies are more than twice as likely to die before their first birthday as white babies.

Christine Grant, acting commissioner of the DHSS, said the "Black Infants Better Survival" campaign will provide black women with information on how to take better care of themselves and their babies.

"Public recognition and acknowledgment of the problem is the first essential step," Grant said. "We know that without being alerted to

the risks, a black mother might not realize she faces a greater risk."

A state-commissioned panel, established in 1996, found that many black women are unaware that their babies are dying at a disproportionate rate.

While statistics show there has been a sharp decline in black infant mortality in New Jersey since the 1980s, the number of black infant deaths is still more than double that of white infant deaths.

In 1985, the black infant mortality rate was 90.3 for every 1,000 live births in New Jersey. That number plummeted to 14.9 in 1996.

The number of white infant deaths for every 1,000 live births, however, was 5.3 in 1996.

Yvonne Wesley, co-chair of the panel that authored the report on black infant mortality reduction, said "psycho-social stressors" are primarily responsible for premature delivery and low birth-weight babies.

"We think it has something to do

with racism," said Wesley, who is also director of Research and Development at the Northern New Jersey Maternal/Child Health Consortium, a regional health planning agency.

After holding town meetings, the panel concluded in its report that "slavery, personal and frequent racial insults, and variations in access to services may translate into poorer birth outcomes for black women."

Dr. Eric Schwartz, medical director at the Henry J. Austin Health Center in Trenton, where the new campaign was unveiled, said there are many factors that cause the disparity between white and black babies.

"The key is increasing pre- and postnatal care," he said.

Women increase their risk when they don't take prenatal vitamins or other proper medications, have a poor diet, and smoke or drink alcohol, he said.

Lack of immunizations and regu-

lar checkups for babies also contribute to the death rate, he added.

"Education is the critical place (in preventing infant deaths)," he said.

The campaign, created by Nancy Becker Associates of Trenton, consists of print, radio and television public service announcements.

Perhaps the most poignant — and chilling — component is a 30-second video portraying a mother whose baby just died.

Standing in an empty nursery, a forlorn woman smells the baby's clothes as she takes each item out of the drawer. She packs away a stuffed animal and the mobile hanging over the crib. The announcer talks about dreams and plans that went awry, but then tells new and expectant moms how they can obtain life-saving information.

□ The campaign includes a telephone hot line (1-888-414-BIBS) and a Web site (www.state.nj.us/health/bibs).

N.J. begins \$1M effort to cut infant mortality among blacks

By NINA RIZZO

The Associated Press

TRENTON — The state Department of Health and Senior Services launched a two-year, \$1 million public awareness campaign Tuesday to inform black women that their babies are more than twice as likely to die before their first birthday than white babies.

Christine Grant, acting commissioner of the DHSS, said the "Black Infants Better Survival" campaign will provide black women with information on how to take better care of themselves and their babies.

"Public recognition and acknowledgement of the problem is the first essential step," Grant said. "We know that without being alerted to the risks, a black mother might not realize she faces a greater risk."

A state-commissioned panel, established in 1996, found that many black women are unaware that their babies are dying at a disproportionate rate.

Although statistics show there has been a sharp decline in black infant mortality in New Jersey since the Eighties, the number of black infant deaths is still more than double that of white infant

deaths.

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Women increase their risk when they don't take prenatal vitamins, proper medications, have a poor diet, smoke, or drink alcohol, he said.

Lack of immunizations and lack of regular checkups for babies also contribute to the death rate, he added.

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The campaign includes a telephone hot line (888-414-BIBS) and a Web site: www.state.nj.us/health/bibs.

Project hopes to help black infants survive

PROGRAM from B1
tools such as newspapers, billboards, radio and television. But we also need to reach directly into the black community around the state, through personal interaction."

Among the white population in New Jersey in 1996, the latest year for which statistics are available, there were 5.6 infant deaths per every 1,000 babies. Among blacks, the number was 14.9 per 1,000 births. New Jersey ranked 16th among the 35 states that are exploring the black-white infant mortality issue, officials said.

In Philadelphia, officials report that for every 1,000 black births, 17 die within a year — about twice the overall city rate.

Nationally the numbers are similar: For every 1,000 white babies born, an average of 6.7 die in the first year. Among black infants, that number is between 14 and 16 per 1,000 births, Spring said.

"And Atlantic City has one of the highest infant mortality rates in New Jersey, so this city is severely affected by this disparity," Spring said, explaining why Atlantic City was chosen as the location to launch the campaign.

"But to come up with answers as to why we need to raise awareness about this issue, make people conscious of the problem, because what kills one baby could kill all babies."

The campaign also includes a critical public health component, said Celeste Wood, acting assistant commissioner of the state Division of Family Health Services.

"While there does not appear to be any single factor that prevents or causes black infant death, pre- and postnatal care is an important

component of any healthy pregnancy, birth and infancy," Wood said. New Jersey is among the first states to "put this issue on the table and deal with it" with an extensive project like the BIBS campaign, Spring said.

With \$1 million in seed money, the project actually got underway in May with public-service announcements on television and radio, including one featuring Gov. Whitman, that informed the public about the disparity between black and white infant death statistics.

But besides an extensive new advertising campaign geared toward the black community, the latest phase of the project announced yesterday will take a more grassroots approach by offering presentations and seminars to black women of childbearing age and providing staff training workshops for medical professionals. It will also help link New Jersey residents with a national program called Birthing Project USA, which recruits pregnant minority women and potential "sister-friend" mentors to assist women during pregnancy and up to one year after birth.

Karrina Mulley, 36, was one of the dozen or so African American women from Atlantic City who gathered for the launch.

"I came here today to get a little information on this that I could take back to my family and friends," said Mulley, the mother of two, who has two nieces whose infants died for unexplained reasons.

"But I'm walking away from this feeling a little empty, because we still don't know what is causing this. I have nothing to go home with today, but I hope that by people talking about it, we can somehow, someday come up with the answers."

The Inquirer

South Jersey

SECTION B

FRIDAY, SEPTEMBER 10, 1999

N.J. project hopes to help black infants survive

By Jacqueline L. Urgo
INQUIRER STAFF WRITER

ATLANTIC CITY — No one knows exactly why the infant mortality rate among black babies in New Jersey — and nationwide — is more than twice the average for white babies within the first year of life.

But a project called Black Infants Better Survival, launched at the Atlantic City Medical Center yesterday by the

New Jersey Department of Health and Senior Services, is geared at raising awareness about the issue among the black community.

The hope is that communication may lead to research into determining a cause for the high number of minority infant deaths, according to Henry Spring, acting deputy commissioner of the state Department of Health.

"From the beginning, the department

recognized that it is critical for the BIBS campaign to reach the people most affected by black infant death: black women of childbearing age and their families," Spring told a crowd of medical personnel, reporters, and a group of African American mothers who live in Atlantic City.

"To accomplish this," he said, "BIBS needed to employ traditional communica-

See PROGRAM on B4

State trying to reduce deaths of black infants

Camden and Gloucester counties have higher death rates for black infants.

By ANGELA RUCKER
Courier-Post Staff

ATLANTIC CITY

No matter her education or income, no matter if she lives in an inner-city apartment or a tony suburban rancher, a black woman in New Jersey is more than twice as likely to see her newborn infant die by the time the baby reaches age 1 than is a white woman.

Women in Camden and Gloucester counties have even more to worry about. In Camden County, babies die nearly three times as often as white babies. Black babies in Gloucester County die nearly four times as often as do white babies there.

Both counties reported five-year black infant mortality rates that are higher than the comparable statewide figure of 16.4 deaths per 1,000 live births. Burlington County's infant mortality rate for black babies, at 12.4 per 1,000, is below the state figure.

No one knows why the disparity exists. The rates for black infant deaths remain higher than those for white infants even after education and socioeconomic indicators are factored in.

But state officials are hoping that in their efforts to decrease the numbers of black infant deaths, they will come across the answer.

Thursday, Dr. Henry Spring, acting deputy commissioner of the New Jersey Department of Health and Senior Services, kicked off the second stage of a \$1 million state effort — called Black Infants Better Survival, or BIBS — to tell state residents about the state's high number of black infant deaths and to encourage them to do something about it. The first stage started in May with an advertising campaign.

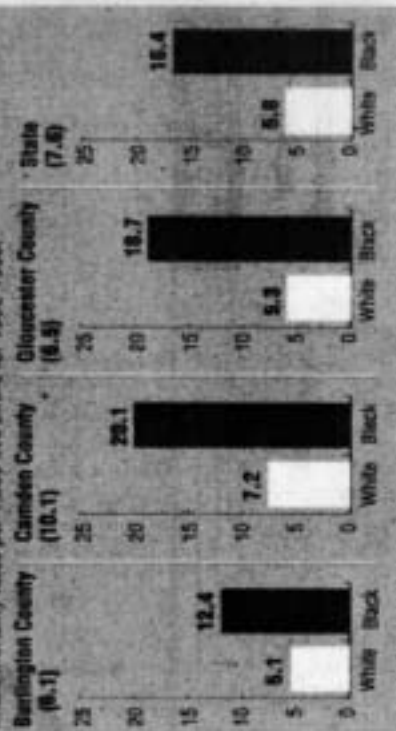
The latest effort will continue the advertising efforts — the centerpiece is posters of a 30-ish African-American woman cuddling a baby who appears to be playing with the woman's necklace.

The new effort also includes grass-roots outreach efforts through churches and social and community groups. The aim of the program is to raise awareness and encourage black women and their families to seek pre- and post-natal care.

The state has set up a Black Infant Mortality Reduction and Resource Center in Bergen County to serve professionals and is in the process of expanding its Web site — www.state.nj.us/health/bibs — to include information for doctors, nurses, midwives and other health

Infant mortality rates

Infant mortality rates per 1,000 live births for 1992-1996.



Source: New Jersey Department of Health and Senior Services

SHELDON L. BREED / Courier-Post

For Information

- Call 1-888-414-BIBS if you have questions about infant mortality and for referrals to low-cost and free medical care.
- Information is also available at www.state.nj.us/health/bibs.

care workers who deal with pregnant women.

But the question of why these disparities exist has state health officials perplexed. One factor may be the most obvious.

Rhonda Wise, whose Newark-based company will provide education programs throughout the state as part of BIBS, put it this way: stress is a factor in pre-term labor, which

in turn is a high predictor of infant mortality. And, black women are under a lot of stress, perhaps due in part from racism.

"Though the word doesn't come up, it might have to do with being black in America," Spring said.

While there is no scientific proof that racism is the cause, there's nothing to disprove it either, he said. Spring added that the answer is not likely to be just one cause.

"If we can find out what is killing one child, we can save a lot of children," Spring said.

Black infant mortality became a front-burner issue for the state after the release in 1997 of a final report by the Blue Ribbon Panel on Black Infant Mortality. The upshot of the report: that black babies were dying far too often and that the state needed to reverse that trend.

Friday, September 10, 1999

e.com

BIBS program targets black infant mortality

By **ANGELA RUCKER**
Courier-Post Staff

ATLANTIC CITY

Despite a steady decline in overall infant mortality in New Jersey, African-American babies are dying at more than twice the rate of white infants.

Since May, the state Department of Health and Senior Services has been publicizing its \$1 million effort to cut the number of black infant deaths through Black Infants Better Survival, or BIBS, on television, radio, billboards and transit posters and in newspapers.

On Thursday, Dr. Henry Spring, acting deputy commissioner of the health department, said now it is time to "get up close and personal" with black New Jersey residents.

Troubling trend

■ Rates higher in Camden, Gloucester counties.

Page 4A

Stage two of BIBS kicked off here with the announcement of a multi-pronged effort to reach out to black women of child-bearing age and their families to inform them about the high rate of black infant mortality and what they can do about it.

The second stage of BIBS will also push grass-roots efforts — through churches, social and community groups — to fight black infant mortality.

"We want to see that more and more children live and less and less die," Spring said.

COURIER-POST
CHERRY HILL, NJ

D - 95,932

S - 106,230

SEP 12 1992

1-732-842-1616
GARDEN STATE PRESS
CLIPPING BUREAU

Shocking disparity in baby deaths

Black babies are dying and nobody knows why. It's a tragedy that deserves the highest priority.

As the second phase of the state's Black Infants Better Survival (BIBS) program kicked off, state officials acknowledged nobody really knows why more black babies die than white babies. The program, though, seems to be headed in a direction that might yield some answers.

A black woman in New Jersey is more than twice as likely to see her newborn infant die by the time the baby reaches the age of one than a white woman. Education and socio-economics don't matter.

The news for black women in Camden and Gloucester counties is even worse. In Camden County, black babies die nearly three times as often as white babies. Black babies in Gloucester County die nearly four times as often as do white babies there.

BIBS, which has been running advertisements trying to raise awareness about infant mortality, now is taking the fight to another level.

The latest effort will continue ad-

vertising efforts, but also will include grass-roots outreach programs. Through churches and social and community groups, the state will try to reach black women and encourage them to seek pre- and post-natal care.

In addition, the state has established a hotline — 1-800-414-BIBS — to answer questions and make referrals.

For a long time, common knowledge held infant mortality could be reduced through education and better access to medical care. It was thought poverty played a critical role.

Perhaps these issues still are a part of the reason too many black babies are dying, but clearly something else is happening too. Is it stress related to racism? Is it some other factor no one has ever stopped to consider?

Let's hope the outreach program provides some answers. By talking to black women and listening to what they have to say, perhaps some additional clues can be developed and, eventually, a plan put in place to end this tragedy.

DAILY RECORD
PARSIPPANY, NJ
D - 50,387
S - 56,294

OCT 19 2000

732-842-1616
GARDEN STATE PRESS
CLIPPING BUREAU

State aims to cut black infant mortality

Grants to seven agencies target higher death rate among minority babies

BY MARIN SUTCLIFFE
TRENTON

TRENTON — The New Jersey Department of Health and Senior Services awarded \$1 million in partnership grants Wednesday to seven agencies with programs aimed at reducing the number of black babies who die and aiding black women of childbearing age.

Through these seven programs, "we are going to be able to make pregnancy the happy and healthy event it should be for all families," said Christine Grant, commissioner of the Department of Health and Senior Services. The grants were awarded as part of the Black Infants Better Survival campaign.

Infant mortality rates have sharply declined since the 1980s, Grant said. The infant mortality rate is the number of children who die before their first birthday per 1,000 births during the

calendar year.

MORRIS INFANT MORTALITY RATES 1992-1997

4.8 percent white non-Hispanic out of 5.3 percent state total

22.5 percent black, non-Hispanic out of 16.8 percent state total

infant mortality rate was 19.1, compared to 14.7 in 1997.

But the rate of black infant mortality is still almost three times that of white infants, Grant said. "We need to reduce the racial disparity in access to children's health care," she said.

The Central New Jersey Maternal and Child Health Consortium based in Piscataway received \$105,000 as part of the BIBS campaign. The consortium provides services to at-risk families in Plainfield and New Brunswick, especially families that have been exposed to high

lead areas, according to Denise Stickle Piroviti, executive director of the program.

Piroviti said the money would be used to extend the consortium's existing programs to include prenatal care for black mothers.

The program is currently hiring nurses to monitor and counsel pregnant women on keeping doctor's appointments, ensuring they receive proper medical treatment, reducing stress, and maintaining healthy lifestyles, Piroviti said. The consortium is also planning to distribute edu-

cation kits and small community grants to local organizations for programs to educate black mothers-to-be.

Grants were also distributed to the following programs: Ad House — Healthy Start Resource Center in Newark, the East Orange Department of Health, the Trenton Division of Health, Heuricks Center in Willingboro, Hudson Perinatal Consortium in Jersey City and the Northern New Jersey Maternal and Child Health Consortium in Paramus. The BIBS program was founded in May 1998.

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CLIPPING BUREAU

Agencies given \$1M in fight against black infant deaths

By MAURIN SUTCLIFFE
Garrett State Bureau

TRENTON — The N.J. Department of Health and Senior Services awarded \$1 million in partnership grants Wednesday to seven agencies with programs to reduce the number of black babies who die and aid black women of child-bearing age.

Through these seven programs, "we are going to be able to make pregnancy the happy and healthy event it should be for all families," said Christine Grant, commissioner of the Department of Health and Senior Services. The grants were awarded as part of the

Mortality rates

Black infant mortality rates per 1,000 births:

- Cumberland County — 16.8
- Atlantic County — 21.2
- Gloucester County — 18.0
- Salem County — 23.4

Black Infants Better Survival campaign.

Infant mortality rates have sharply declined since the 1980s, Grant said. The infant mortality rate is the number of children who die before their first birthday per 1,000 births during the calendar year.

In 1990, the state's black infant mortality rate was 191,

compared to 14.7 in 1997.

Cumberland County's black infant mortality rate is 16.8 per 1,000 births, most recent figures show.

Despite the declines, the rate of black infant mortality is still almost three times that of white infants, Grant said.

"We need to reduce the racial disparity in access to children's health care," she said.

The Central New Jersey Maternal and Child Health Consortium in Piscataway received \$105,000 as part of the BIBS campaign. The consortium provides services to at-risk families in Plainfield and New Brunswick, especially

families that have been exposed to high lead areas, according to Denise Stickle Pironti, executive director of the program.

Pironti said the money would be used to extend the consortium's programs to include prenatal care for black mothers.

The program is currently hiring nurses to mentor and counsel pregnant women on keeping doctor's appointments, ensuring they receive proper medical treatment, reducing stress, and maintaining healthy lifestyles, Pironti said.

The consortium is also planning to distribute education kits and small community

grants to local organizations for programs to educate black mothers-to-be.

Grants were also distributed to the following programs: Ad House — Healthy Start Resource Center in Newark, the East Orange Department of Health, the Trenton Division of Health, Heureka Center in Willingboro, Hudson Perinatal Consortium in Jersey City and the Northern New Jersey Maternal and Child Health Consortium in Paramus.

The BIBS program was founded in May 1989 to raise public awareness of the differences in mortality rates for black and white infants.

NEW JERSEY

Aid targets lowering deaths of black babies

By MAIRIN SUTCLIFFE
GANNETT STATE BUREAU

TRENTON — The New Jersey Department of Health and Senior Services awarded \$1 million in partnership grants yesterday to seven agencies with programs aimed at reducing the number of black babies who die and aiding black women of childbearing age.

Through these seven programs, "we are going to be able to make pregnancy the happy and healthy event it should be for all families," said Christine Grant, commissioner of the Department of Health and Senior Services. The grants were awarded as part of the Black Infants Better Survival campaign.

Infant mortality rates have sharply declined since the 1980s, Grant said. The infant mortality rate is the number of children who die before their first birthday per 1,000 births during the calendar year.

In 1990, the state's black in-

fant-mortality rate was 19.1, compared to 14.7 in 1987.

But the rate of black infant mortality is still almost three times that of white infants, Grant said.

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In New Jersey, BIBS Means Black Infants Better Survival

Infant mortality affects all states and territories. Despite progress in reducing national rates of infant mortality, the rate of black infant mortality remains more than two times higher than that of white infant mortality. The New Jersey Department of Health and Senior Services (DHSS) Division of Family Health Services recognized this health disparity and decided to take action.

In December 1996, the Commissioner of DHSS convened a Blue Ribbon Panel on Black Infant Mortality Reduction that was charged with studying black infant mortality and recommending ways to more effectively use state resources to reduce black infant mortality rates. In 1998, an advisory council was created to assist in the implementation of the Panel's strategies. Their recommendations were focused on three areas: education and awareness; cultural competency training; and programs and services.

In response to these recommendations, the NJ DHSS launched a multifaceted campaign, supported by \$1 million of state funding over a two-year period. The theme for the campaign is BIBS—Black Infants Better Survival. The first phase centers on a public awareness campaign that features print advertisements for the general public in newspapers, magazines, billboards, and on mass transit, a TV spot, and a radio public service announcement read by Governor Whitman. The DHSS also created a BIBS Web site and a toll-free number (1-888-414-BIBS) to provide referrals to women for low-cost or free medical care in the caller's neighborhood.

The second phase of BIBS focuses on community outreach and education to



target black women of childbearing age through community organizations, clinics, and faith-based organizations. The professional education part of the campaign consists of the creation and implementation of a cultural competency training to help health providers recognize and deal sensitively with differences in ethnic, cultural, and religious backgrounds to effectively respond to a patient's needs. Other materials developed include a special section for providers on the BIBS web site; the designation and funding of a Black Infant Mortality Reduction and Resource Center to provide information and technical support to professionals and programs interested in improving maternal and infant health in black families; and a roving symposium in conjunction with the Academy of Medicine of New Jersey (through a grant from Johnson & Johnson) to provide continuing education credits to physicians.

The DHSS offers grants to local health departments and community-based agencies in high-risk areas to support home visiting and case management services. These grants facilitate family education in parenting skills, child development, child health safety, and linkages to community-based care centers. In the

year 2000, over 1,600 families were served through these projects.

Celeste Wood, Director of Maternal, Child, and Community Services, Division of Family Health Services, explained that \$1 million was recently added to the community-based activities arm of BIBS for innovative programs to reach African American women, both prior to conception and during pregnancy. She added that BIBS will be working on a "train-the-trainer" component for use by community organizations to train outreach workers and to provide neighborhood education. Ms. Wood stated that the program has been "well-accepted" and that there is a "high interest in the African American community and broader community in the way things are moving." She also noted that other states are beginning to customize the BIBS campaign for their populations.

The NJ DHSS works with other agencies to ensure the success of the BIBS program. They have standing joint meetings with the NJ Department of Human Services, including the director of Medicaid to discuss BIBS activities, and county and district Medicaid offices display BIBS public awareness materials. In addition, the Department of Education has consulted on educating African American youth and young adults on black infant mortality.

Additional information is available on the BIBS Web site at: <http://www.state.nj.us/health/bibs> or contact:

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BUSINESS WATCH

► MERGERS & ACQUISITIONS

- Universal Health Services, King of Prussia, Pa., agreed to acquire 11 psychiatric hospitals in eight states for about \$105 million from Charter Behavioral Health Systems LLC, Alpharetta, Ga., through a bankruptcy auction. UHS expects to complete the purchase on or about July 1.
- Three-hospital Adventist HealthCare, Rockville, Md., will acquire 142-bed Charter Behavioral Health System of Maryland, Rockville, for \$7.2 million. Louisville (Colo.) Care Partners will purchase 72-bed Charter Centennial Peaks Behavioral Health System of Louisville, Colo. Charter filed for Chapter 11 bankruptcy reorganization in February and the purchases have been

approved by the bankruptcy court.

- Trinity Health, Farmington Hills, Mich., acquired the non-real estate assets of St. Mary Hospital, the St. Mary Child Care Center and the Marian Professional Building in Livonia, Mich. The acquisition will be called St. Mary Mercy Hospital, the 10th member of Trinity's Michigan operations.
- Health Management Associates says it will acquire Pasco Community Hospital, Dade City, Fla. The company expects to close a deal on the 120-bed acute care hospital on or about Aug. 1. After that the company will operate 36 facilities in 11 states.
- Health Management Associates, Naples, Fla., signed a definitive agreement to buy 120-bed Pasco Community Hospital, Dade City, Fla., from HCA-The Healthcare Co., Nashville.
- Four-hospital Memorial Health Systems,

Ormond Beach, Fla., plans to merge with 32-hospital Adventist Health System, Winter Park, Fla. The merger is expected to be completed by Aug. 31.

- A federal bankruptcy court approved the sale of Lander (Wyo.) Valley Medical Center to LifePoint Hospitals, based in Brentwood, Tenn. The hospital's owner, New American Healthcare, Corp., filed for bankruptcy in April.
- Guilford Pharmaceuticals, Baltimore, will merge with Gliatech, Cleveland, in a stock transaction valued at about \$235 million. The combined biopharmaceutical company will develop new treatments for neurological disease.
- Healtheon/WebMD, Atlanta, completed its acquisition of Envoy Corp., Nashville, from Quintiles Transnational Corp., Research Triangle Park, N.C.

NEED TO KNOW

Combating black infant deaths

In New Jersey, in 1996, for every 1,000 live births there were 14.9 black infant deaths and 5.3 white infant deaths. Even after adjusting for demographics and other factors, black babies died at a rate twice that of white babies. New Jersey's health department last year launched an awareness campaign aimed at the general public, black women, and health care providers. Results are encouraging: Both patients and providers are contacting the health department and asking to know more. — RICHARD HAUGH •



Client: N.J. Department of Health & Senior Services, Trenton

Agency: Nancy Becker Assoc., Trenton; Lynn Nowak, (609) 394-7477

Media: Radio, newspaper, billboard; community groups; book distributed to providers

Timing: May 1999-December 2000

Budget: \$1.3 million